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CONFIRMATION NO. 5604

SERIAL NUMBER 09/991,809	FILING DATE 11/23/2001 RULE	CLASS 435	GROUP ART UNIT 1632	ATTORNEY DOCKET NO. 2132.111	
APPLICANTS George Jackowski, Kettleby, CANADA; John Marshall, Toronto, CANADA; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 12/10/2001					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials		STATE OR COUNTRY CANADA	SHEETS DRAWING 3	TOTAL CLAIMS 38	INDEPENDENT CLAIMS 5
ADDRESS McHale & Slavin, P.A. Suite 402 4440 PGA Blvd. Palm Beach Gardens ,FL 33410					
TITLE Apolipoprotein biopolymer markers predictive of type II diabetes					
FILING FEE RECEIVED 681	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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CONFIRMATION NO. 5604

SERIAL NUMBER 09/991,809	FILING OR 371(c) DATE 11/23/2001 RULE	CLASS 435	GROUP ART UNIT 1641	ATTORNEY DOCKET NO. 2132.111	
APPLICANTS George Jackowski, Kettleby, CANADA; John Marshall, Toronto, CANADA;					
** CONTINUING DATA *****					
** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 12/10/2001					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Allowance Acknowledged <i>[Signature]</i> Examiner's Signature <i>[Initials]</i> Initials		STATE OR COUNTRY CANADA	SHEETS DRAWING 3	TOTAL CLAIMS 38	INDEPENDENT CLAIMS 5
ADDRESS 21917					
TITLE Apolipoprotein biopolymer markers indicative of type II diabetes					
FILING FEE RECEIVED 681	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		